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PTO/SB/21 (01-08)

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Total Number of Pages In This Submission **20**

Application Number	10/627,105
Filing Date	24 July 2003
First Named Inventor	Anthony A. Ruffa
Art Unit	2874
Examiner Name	H. Tran
Attorney Docket Number	79865

ENCLOSURES (Check all that apply)

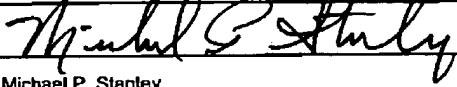
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
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Remarks		
Petition to revive abandonment The USPTO has authorization to charge and credit any fees to deposit account no. 14-0590		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Naval Undersea Warfare Center, Division Newport		
Signature			
Printed name	Michael P. Stanley		
Date	4-14-08	Reg. No.	47108

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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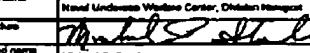
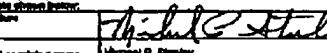
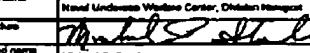
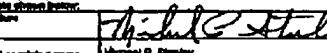
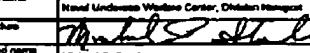
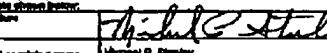
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Tapp Attorney Doctoral Number: Total </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> ENCLOSURES (Check all that apply) </td> </tr> <tr> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> After Final/Maintenance(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.38 or 1.33 </td> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Reservation of Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number or CD# <input type="checkbox"/> Landscape Plate on CD </td> <td style="vertical-align: top; padding: 5px;"> <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC, Appeal Notice, Filed, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other (checkmark) (please identify below): </td> </tr> <tr> <td colspan="4" style="padding: 5px;"> SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT First Name: David Undurraga Wallace Carter, Children Hospital Signature:  Printed name: Michael P. Stanley Date: 10-11-07 Reg. No. 47408 </td> </tr> <tr> <td colspan="4" style="padding: 10px;"> CERTIFICATE OF TRANSMISSION/MAILING <small>I hereby certify that this correspondence is being initially transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage or first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 10/11/2007.</small> Signature:  Typed or printed name: Michael P. Stanley Date: 10-11-07 </td> </tr> </table>				Application Number: 10/027,669 Filing Date: 04 July 2007 First Named Inventor: Anthony A. Russo Art Unit: 2167A Examiner Name: H. 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